FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

l	OMB APPRO	VAL
	OMB Number:	3235-0287
l	Estimated average burd	en
l	hours per response:	0.5

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

					01 3	Secu	011 30(11)	) or trie	iiivesiii	ieni c	20111	pany Act (	01 19	40							
1. Name and Address of Reporting Person* <u>CARTWRIGHT CAROL A</u>						2. Issuer Name and Ticker or Trading Symbol POLYONE CORP [ POL ]											5. Relationship of Rep (Check all applicable) X Director			. ,	
(Last) (First) (Middle) POLYONE CENTER 33587 WALKER ROAD					3. Date of Earliest Transaction (Month/Day/Year) 12/31/2008											Λ		er (give title	10% Ov Other (s below)		specify
(Street) AVON LAKE OH 44012					4. If Amendment, Date of Original Filed (Month/Day/Year)											6. Indi Line) X	ridual or Joint/Group Filing (Check Applicable Form filed by One Reporting Person Form filed by More than One Reporting Person				
(City)				n-Deriv	ative	Se	curiti	es Ac	auire	d. D	isn	osed o	f. 0	r Ber	nefic	ially	Owne	ed e			
Da					2. Transaction Date (Month/Day/Year)			2A. Deemed Execution Date, if any (Month/Day/Year)		3. 4. Secu Transaction Dispos Code (Instr. 5)			ties /	Acquire	ed (A)	or 5. Amount of		ount of ties cially I Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership
									Cod	de \	,	Amount		(A) or (D)	Pri	се	Transa	ted action(s) 3 and 4)			(Instr. 4)
Common Stock 12/3						/2008			A			6,291		A	:	\$0		59,125		D	
Common Stock																	4	49,011		I	Deferred Comp Plan
Common Stock																	200			I	by Spouse
		Ta	able II - I									sed of, nvertib					wned				
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	e (Month/Day/Year	3A. Deemd Execution if any (Month/Da	Date,	4. Transa Code ( 8)		of Deriv Secu Acqu (A) of Disp	osed ) r. 3, 4	6. Date Expira (Monti	tion [	Date		7. Title and Amount of Securities Underlying Derivative Security (Instr. and 4)		g instr. 3 mount	Deri Sec (Ins	ivative curity str. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s (Instr. 4)		10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)
					Code	v	(A)	(D)	Date Exerc	isable		xpiration ate	Titl	of	ımber nares						

**Explanation of Responses:** 

By: Lisa K. Kunkle, Power of

Attorney For: Carol A.

Cartwright

\*\* Signature of Reporting Person Date

01/05/2009

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

- \* If the form is filed by more than one reporting person, see Instruction 4 (b)(v).
- \*\* Intentional misstatements or omissions of facts constitute Federal Criminal Violations See 18 U.S.C. 1001 and 15 U.S.C. 78ff(a).

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, see Instruction 6 for procedure.

Persons who respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB Number.